# Petition for Extension of Time under 37 CFR 1.136(a)

| Application No. | 10/608,305 | Attorney Docket | ARC 3251 R1 |
|---|---|---|---|
| Filing Date | 2003-06-27 | Art Unit | 1616 |
| First Inventor | Liang-Chang DONG | Examiner | Sharmila S. Gollamudi |
| Title | Controlled Release Capsule for Delivery of Liquid Formulation | | |

This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above-identified application.

The requested extension and appropriate fee are as follows (check time period desired and enter the appropriate fee below):

| | | Fee ($) | Small Entity Fee ($) | Fee Paid ($) |
|---|---|---|---|---|
| ☐ | One month (37CFR 1.17(a)(1)) | 120 | 60 | |
| ☒ | Two months (37CFR 1.17(a)(2)) | 460 | 230 | 460 |
| ☐ | Three months (37CFR 1.17(a)(3)) | 1050 | 525 | |
| ☐ | Four months (37CFR 1.17(a)(4)) | 1640 | 820 | |
| ☐ | Five months (37CFR 1.17(a)(5)) | 2230 | 1115 | |

☐ Applicant claims small entity status. See CFR 1.27.

☐ A check in the amount of the fee is enclosed.

☒ Payment by EFS-Web.

☐ The Director has already been authorized to charge fees in this application to a Deposit Account.

☐ The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number ___. I have enclosed a duplicate of this sheet.

WARNING: *Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.*

I am the

    ☐ applicant/inventor

    ☐ assignee of record of the entire interest. * See 37 CFR 3.71.

        ☐ Statement under 37 CFR 3.73(b) is enclosed.

    ☒ attorney or agent of record. Registration Number **42254**.

    ☐ attorney or agent under 37 CFR 1.34(a). Registration Number ___.

| Typed or printed name | Adenike A. Adebiyi | Telephone | 281-856-8646 |
|---|---|---|---|
| Signature | *Adenike Adebiyi* | Date | 12/18/2007 |

NOTE: Signatures of all the inventors or assignees of record of entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required.

☐ Total of ___ forms are submitted.